

Use in lieu of PTO/SB/17 (08-03)
(Form updated to reflect FY 2004 fees effective 10/1/03)

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003, Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 290.00)

Complete if Known

Application Number	10/078743
Filing Date	February 19, 2002
First Named Inventor	Douglas U. Mennie
Examiner Name	Not Yet Assigned
Art Unit	N/A
Attorney Docket No.	47171-00300US

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FEB 12 2004

GROUP 3600

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

Deposit Account:

Deposit Account Number

10-0447

Deposit Account Name Jenkins & Gilchrist, a Professional Corporation

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	

SUBTOTAL (1) (\$ 0.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 88	2201 43	Independent claims in excess of 3
1203 280	2203 145	Multiple dependent claim, if not paid
1204 88	2204 43	" Reissue independent claims over original patent
1205 18	2205 9	" Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00)

**** or number previously paid, if greater; For Reissues, see above**

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	110.00
1252 420	2252 210	Extension for reply within second month	
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1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
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1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 840	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	180.00
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.128(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 290.00)

(Complete if applicable)

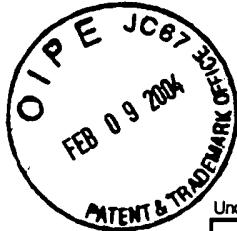
SUBMITTED BY			
Name (Print/Type)	Mark Anderson	Registration No. (Attorney/Agent)	54,656
Signature	<i>Mark R. Anderson</i>	Telephone	(312) 425-8547
		Date	February 6, 2004

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: February 6, 2004

Signature: *Maureen K. Hammonds*

(Maureen K. Hammonds)



3653

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	1	Application Number	10/078743
		Filing Date	February 19, 2002
		First Named Inventor	Douglas U. Mennie
		Art Unit	3653
		Examiner Name	Kenneth W. Bower

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

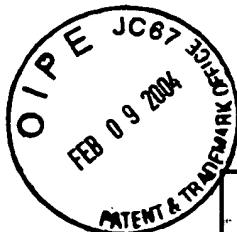
Firm or Individual name	JENKENS & GILCHRIST, A PROFESSIONAL CORPORATION Mark Anderson
Signature	
Date	February 6, 2004

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Dated: February 6, 2004

Signature:

(Maureen K. Hammonds)



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Jenkens & Gilchrist, a Professional Corporation

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Multiple Dependent	.. =			

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Application Number	10/078743
Filing Date	February 19, 2002
First Named Inventor	Douglas U. Mennie
Examiner Name	Not Yet Assigned
Art Unit	N/A
Attorney Docket No.	47171-00300USC2

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GROUP 3600

FEE CALCULATION (continued)

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Other fee (specify)		SUBTOTAL (3)	(\$) 290.00

*Reduced by Basic Filing Fee Paid

(Complete if applicable)			
Name (Print/Type)	Mark Anderson	Registration No. (Attorney/Agent)	54,656
Signature		Date	February 6, 2004

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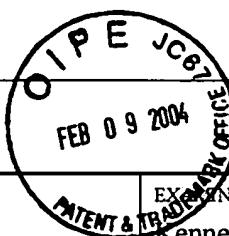
Dated: February 6, 2004

Signature: (Maureen K. Hammonds)

AMENDMENT TRANSMITTAL LETTER

ATTORNEY'S DOCKET NO.:

47171-00300USC2

SERIAL NUMBER:
10/078,743FILING DATE:
February 19, 2002EXAMINER:
Kenneth W. BowerGROUP ART UNIT:
4553**RECEIVED**

INVENTION: METHOD AND APPARATUS FOR DISCRIMINATING AND COUNTING DOCUMENTS

FEB 12 2004

INVENTOR(S): DOUGLAS U. MENNIE

GROUP 3600

TO THE ASSISTANT COMMISSIONER OF PATENTS AND TRADEMARKS:

Transmitted herewith is an amendment in the above-identified application. The fee has been calculated as shown below.

CLAIMS AS AMENDED

(1)	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5) NO. OF EXTRA CLAIMS PRESENT	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	122	MINUS	45	77	X 18	\$1,386.00
INDEP. CLAIMS	42	MINUS	14	28	X 86	\$2,236.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$3,622.00

* If the entry in column 2 is less than the entry in column 4, write "0" in column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

 A check in the amount of \$3,622.00 is enclosed. Charge \$ _____ to Deposit Account No. 10-0447 (47171-00300USC2) . A triplicate

copy of this sheet is enclosed.

 The Commissioner if hereby authorized to charge any additional fees which may be required at any time during the prosecution (except for payment of the Issue Fee) of this application without specific authorization, or credit any overpayment to Deposit Account No. 10-0447 (Order No. 47171-00300USC2). The undersigned petitions for any extension of time for filing this document required under 37 C.F.R. 1.136 and a check in the amount of \$ _____ is enclosed.

February 6, 2004

Date

JENKENS & GILCHRIST

225 West Washington Street, #2600
Chicago, Illinois 60606
312.425.3900

Signature

Mark R. Anderson,

Registration No. 54,656

Attorney, Reg. Number

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February 6, 2004

(Date)

(Signature)

Maureen Hammonds

(Printed)